



**City of Norfolk**  
**Department of Human Resources**  
 810 Union Street  
 100 City Hall Building  
 Norfolk, VA 23510  
 Job Line (757) 664-4010, Code 353  
 Office (757) 664-4486, FAX (757) 664-4492  
 Internet: <http://www.norfolk.va.us/home.htm>

## APPLICATION FOR EMPLOYMENT

### PERSONAL INFORMATION

Position Applied For \_\_\_\_\_ Position # \_\_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
                     Last                      First                      Middle

Address \_\_\_\_\_  
                                     Number/Street                      City                      State                      Zip Code

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

### GENERAL BACKGROUND INFORMATION

	Yes	No
Are you a citizen of the United States?		
If no, do you have the legal right to work in the United States?		
Are you currently employed by the City of Norfolk?		
Have you ever been employed by the City of Norfolk? If yes, please give dates of employment: From: _____ To: _____ Position Held: _____		
Do you have any relatives currently employed by the City of Norfolk? If yes, please give name, relationship, department and position:		
Do you have any pending criminal charges against you? If yes, ____ Felony ____ Misdemeanor (including driving-related misdemeanors such as driving under the influence, reckless driving and driving on a suspended license) Please explain and give city, state, and dates:		
Have you ever been convicted of any crime including misdemeanors, felonies or traffic infractions? If yes, please explain and give city, state, and dates:		
An affirmative response will in and of itself not disqualify you from employment with the City.		

### EDUCATIONAL BACKGROUND

Circle Highest Level Completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED College: 1 2 3 4 Graduate School: 1 2 3 4					
Name of College/University	Location	Hours Completed	Degree Earned	Major or Specialty	Dates Attended
Other (i.e., vocational, technical, business, etc.)					

## LICENSES AND CERTIFICATIONS

License/Certification	State	Expiration
Indicate (✓) type of Driver's License: Standard <input type="checkbox"/> Commercial (CDL) <input type="checkbox"/> Class <input type="checkbox"/>		
List any licenses/certifications or other authorization you possess to practice a trade or profession (CPA, CPR, LCSW, Lifeguard training, WSI, PE, etc.) including state and expiration date:		

## COMPUTER SKILLS

Indicate (✓) Computer Skills: Word <input type="checkbox"/> Excel <input type="checkbox"/> Access <input type="checkbox"/> Typing Speed _____ WPM
List any additional software experience:

## EMPLOYMENT AND VOLUNTEER EXPERIENCE

The Application for Employment and any Supplementary Experience Form(s) must be completed. A resume may be attached. Starting with your most recent position, describe all paid, military, and applicable volunteer experience. Describe those duties and responsibilities which best demonstrate your qualifications for this position. Please indicate number of attachments: \_\_\_\_\_

Job Title:	Immediate Supervisor:
Employer:	Address:
Phone: ( )	Type of Business:
Dates of Employment – From: To:	Hours/Week: _____ Full-time _____ Part-time _____
Reason for Leaving:	Volunteer _____ Current Salary \$
Job Duties:	
May we contact your current employer? Yes _____ No _____	

Job Title:	Immediate Supervisor:
Employer:	Address:
Phone: ( )	Type of Business:
Dates of Employment – From: To:	Hours/Week: _____ Full-time _____ Part-time _____
Reason for Leaving:	Volunteer _____ Salary \$
Job Duties:	

Job Title:	Immediate Supervisor:
Employer:	Address:
Phone: (    )	Type of Business:
Dates of Employment – From:                      To:	Hours/Week: _____ Full-time _____ Part-time _____
Reason for Leaving:	Volunteer _____ Salary \$
Job Duties:	

Job Title:	Immediate Supervisor:
Employer:	Address:
Phone: (    )	Type of Business:
Dates of Employment – From:                      To:	Hours/Week: _____ Full-time _____ Part-time _____
Reason for Leaving:	Volunteer _____ Salary \$
Job Duties:	

Job Title:	Immediate Supervisor:
Employer:	Address:
Phone: (    )	Type of Business:
Dates of Employment – From:                      To:	Hours/Week: _____ Full-time _____ Part-time _____
Reason for Leaving:	Volunteer _____ Salary \$
Job Duties:	

Job Title:	Immediate Supervisor:
Employer:	Address:
Phone: (    )	Type of Business:
Dates of Employment – From:                      To:	Hours/Week: _____ Full-time _____ Part-time _____
Reason for Leaving:	Volunteer _____ Salary \$
Job Duties:	

## PRIVACY ACT NOTICE

All or part of your completed employment forms may be disclosed outside the Department of Human Resources to:

1. City agencies, upon request, for a list of eligibles to consider for employment, reinstatement, transfer, promotion or demotion.
2. City agency investigators to determine your suitability for City employment.
3. Federal, State, or local agencies, to create other personnel records, after you have been employed by the City of Norfolk.
4. Appropriate Federal, State, or local law enforcement agencies charged with the responsibility of investigating a violation of the law.
5. A requesting Federal, State, or local agency to the extent the information is relevant to the requesting agency's decision.
6. Anyone requesting statistical information (without your personal identification) and for statistical reporting within the confines of Norfolk.
7. Persons, firms or agencies asserting claims or suits against the City, to public agencies conducting investigations into City operations, and to Courts, when required by law.

## CERTIFICATION

I certify that the information supplied by me in this application is complete and true to the best of my knowledge. I understand any misstatement or omission of material facts shall cause forfeiture on my part of all rights to any consideration for employment, or continued employment, transfer, or promotion in the service of the City of Norfolk. I will notify the Department of Human Resources of any change of address and further understand that failure to do so will result in my name being removed from further consideration. Any information regarding former or current employment with the City of Norfolk may be released to necessary individuals for the sole purpose of determining my eligibility for reemployment, transfer, or promotion. Permission is granted to contact my present and previous employers for information concerning my employment history. I also understand that I may be required to furnish names of character references.

I certify that I have read (or had read to me) the class specifications and posted requirements for this position, and that I am fully capable of performing all the essential functions of the position with ☐ without ☐ any reasonable accommodation. If you will need one or more reasonable accommodation(s) in order to perform the essential functions of the position, please list and explain all necessary accommodations below:


Signature \_\_\_\_\_ Date \_\_\_\_\_

An Applicant Information form should accompany this application. If you did not receive this form, please contact the Department of Human Resources.



**The City of Norfolk complies with EEO/ADA guidelines and is a drug-free workplace**



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**APPLICANT INFORMATION**

This information is voluntary and will not be used for making employment decisions. It will not be kept with your application for employment. This information is needed to analyze and assure compliance with state and federal equal employment opportunity laws and to meet the reporting requirements of these laws.

Position # \_\_\_\_\_ Position Applied For \_\_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Number/Street City State Zip Code

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

I have submitted: ☐ Application ☐ Resume ☐ On-line Application

Check the appropriate space: ☐ Male ☐ Female

(✓) Check the space for the racial or ethnic group with which you identify:	
<input type="checkbox"/>	White
<input type="checkbox"/>	Black, African-American
<input type="checkbox"/>	Spanish/Hispanic/Latino
<input type="checkbox"/>	American Indian or Alaska Native
<input type="checkbox"/>	Asian/Pacific Islander/Indian
<input type="checkbox"/>	Other, please indicate race:

How did you find out about this employment opportunity?	(✓)	Please indicate source or location.
Department of Human Resources	<input type="checkbox"/>	
Newspaper	<input type="checkbox"/>	
Friend/Relative	<input type="checkbox"/>	
Outreach Program	<input type="checkbox"/>	
City Employee	<input type="checkbox"/>	
Internet	<input type="checkbox"/>	
Job Fair	<input type="checkbox"/>	
Other	<input type="checkbox"/>	

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## GENERAL INFORMATION

1. The City of Norfolk accepts applications for open positions only.
2. A separate application is required for each position for which you wish to apply. A photocopy of the application will be accepted. Each application must contain an original signature.
3. Resumes may be attached to applications, if desired.
4. Current vacancies are generally advertised in the Sunday classified section of the Virginian Pilot, on the Internet at [www.norfolk.va.us/employment/index.html](http://www.norfolk.va.us/employment/index.html) and on our 24-hour Job Line at (757) 664-4010, Code 353.
5. Employment opportunities are posted on the bulletin board located in the reception area in the Department of Human Resources on the first floor of the Norfolk City Hall Building.
6. Applications are available in the Department of Human Resources, Norfolk Public Library branches and on-line. Applicants can apply on-line by visiting our website.
7. Applications/resumes must be received by the Department of Human Resources by the closing date listed on the position announcement.
8. Applicants are responsible for copying any documentation to be included with the application. Documents attached to an application become a permanent part of the record and are not returned.
9. DMV Records - some positions require a current copy of your Division of Motor Vehicles driving record. This record must be current (within the last 30 days) and must accompany your application. Applications/resumes without the required record check will not be considered.
10. Typing Test – some positions require a typing test. Typing test results will be accepted from the Virginia Employment Commission, an accredited high school, community college, university, vocational school or adult learning or skill center, a temporary employment firm or a test administered by other cities, counties, states or federal government personnel offices and must not be more than one year old. Typing test results must be on the letterhead of the testing agency and be dated and signed by the test administrator. The full name of the test administrator and telephone number must be printed or typed on the results. The results must state the total words per minute (wpm) and number of errors or the total corrected wpm score. Applications/resumes without the required verification will not be considered.
11. Applicants may be required to provide a copy of a diploma, degree or any certification claimed on the application.
12. Applicants selected for interview are usually notified by mail.
13. Applications for those not selected are kept on file only for the life of the vacancy.
14. Applicants are not automatically considered for future vacancies. Should you become aware of another position for which you wish to apply, you must submit an application for that vacancy.
15. The City of Norfolk conducts pre-employment drug screenings.

